-NOTICE OF A PUBLIC MEETING-

Governmental Body: Van Meter City Council Date of Meeting: Wednesday, July 17, 2013

Time/Place of Meeting: 6:00 p.m. - City Hall, 505 Grant St

Business Meeting Agenda:

- 1. Call to Order
- 2. Approval of Agenda
- 3. Introductions
- 4. Fat Randi's Liquor License: Outdoor Service Endorsement (RAGBRAI Beer Garden)
- 5. Appointment of Christopher Boswell as a Public Safety Reserve Officer
- 6. Appointment of Chris Reha as a Public Safety Reserve Officer
- 7. Adjourn

Date Posted: July 16, 2013 BY: Jake Anderson, City Administrator



Alcohol Tobacco Links Contact

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- Privilege Outdoor Service
- Applicant Signature
- Dram Cert
- Local Endorse

Outdoor Service Privilege LC0033627, Fat Randi's, Van Meter

After completion click on the NEXT link to continue to the next screen, or the BACK link to return to the previous screen.

The navigation links on the top may also be used to move around the application.

An Outdoor Service Area is a designated area that is adjacent to the licensed premises. The Application is to be used only if adding Outdoor Service Area Privilege after the original license has been issued. If Outdoor Service Area Privilege is requested at license renewal, mark the appropriate box on the renewal Privileges screen.

After approval the lowa Alcoholic Beverages Division, an amended license will be mailed to the Local Official.

Outdoor Service area dates (must fall within license period)

From: 07/23/2013 MM/DD/YYYY

To: 07/24/2013 MM/DD/YYYY

Submit to the Local Authority the Outdoor Service Area Dram Shop Endorsement. Endorsement dates must correspond with the requested outdoor service dates. (Accord certificates are not accepted).

Explain how the boundaries of the Outdoor Service Area are designated (fence, barricades, etc.)

Extending fence.

Submit a sketch to the Local Authority on 8 $\frac{1}{2}$ x 11" white paper of the outdoor service area showing its relationship to the licensed premises. If a tapper wagon, beer truck etc. is being used, attach a copy of the rental receipt.

Prev

Next 🖭

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Contact Us

lowa Alcoholic Beverages Division 1918 SE Hulsizer Road, Ankeny, IA 50021 Toll Free 866.lowaABD (866.469.2223) Local 515.281.7400

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- Privilege Outdoor Service
- Applicant Signature
- Dram Cert
- Local Endorse

Applicant Signature LC0033627, Fat Randi's, Van Meter

Complete the information below and click Finish to complete the application Note that the license fees will only be withdrawn from accounts after the ABD approves the license.

This application must be completed by a person listed in the Ownership Section.

I hereby declare that all information contained in the Application is true and correct, I understand that misrepresentation of material facts in the Application is a crime and grounds for denial of the license or permit under lowa law. I further understand that, as a condition of receiving a license, the licensed premises is subject to inspection during business hours by appropriate local, state and federal officials.

NOTE: The Applicant's Name must match one of the owner's names from the Ownership screen.

MM/DD/YYYY

Owner's Signature: Randi L Van Rees

Date: 07/16/2013

Tentative effective date: 01/20/2013

MM/DD/YYYY

Funds will be pulled from your account 2 days after ABD approves the license.

Please print a copy of this page for your records before clicking the "FINISH" button.

Finish

If you are not taken to a confirmation screen after clicking on "Finish", please see the notes at the top of the applicant signature screen to find out why the application was not submitted.

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Privilege Outdoor Service

Applicant Signature

Dram Cert

Local Endorse

Dram Shop Liability Certificate of Insurance LC0033627, Fat Randi's, Van Meter

Complete the information below and click SUBMIT to endorse this Renewal application.

| Reason for re-submittal: | | | | | |
|--------------------------|-----------------|---------------|------------------|-------------------|--|
| This is to certify: | Founders Insura | ance Compan | у | | |
| Policy Number: | LLIA003383 | | | | |
| Assured: | Fat Randi's Bar | & Grill, Inc. | | | |
| DBA: | Fat Randi's | | | | |
| Address: | 415 Grant St | | | | |
| Address Line 2: | | | | | |
| City: | | | Y | | |
| State: | | v | | Zip: 50261 | |
| Policy Effective Date: | 01/20/2013 | MM/D | D/YYYY | | |
| То: 🎱 | | | Expiration Date: | 01/20/2014 | |
| Thru: | | | Expiration buto. | MM/DD/YYYY | |

| | CHECK LIST | |
|---------------------------------------|-----------------------------------|--|
| Outdoor Service Endorsement | | |
| Policy Information Verified (if incor | rect please contact the licensee) | |

| | ADD-ON OUT | DOOR SERVICE | ENDORSEMENT | |
|-----------------------|------------|--------------|-----------------------|-------------|
| Policy Effective 07/2 | 23/2013 | то: 🔾 | Expiration 07/24/2013 | MM/DD/YYYY |
| Date: MM | I/DD/YYYY | 10: 🔾 | Date: 0772472013 | WWW.DD/1111 |
| | | Thru: | | |

The above-mentioned policy of insurance (hereinafter policy) contains coverage to comply with the provisions of lowa Code section 123.92 and all regulations of the lowa Department of Commerce, Alcoholic Beverages Division.

The policy may be canceled by the Company of the Assured giving 30 days notice in writing to the Alcoholic Beverages Division at its office, Ankeny, Iowa. The 30 days notice will commence from the date notice is actually received by the division.

Whenever requested by the division, the company agrees to furnish to the division a duplicate original of the policy and all pertinent endorsements.

Signature:

Date:

MM/DD/YYYY



Submit

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lowa Alcoholic Beverages Division 1918 SE Hulsizer Road, Ankeny, IA 50021 Toll Free 866.lowaABD (866.469.2223) Local 515.281.7400

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License Application (LC0033627

Applicant

Name of Applicant: Fat Randi's Bar & Grill, Inc.

Name of Business (DBA): <u>Fat Randi's</u>

Address of Premises: <u>415 Grant St</u>

City: Van Meter County: Dallas Zip: 50261

Business Phone: (515) 996-9400

Mailing Address: PO Box 21

City: Van Meter State: IA Zip: 502610021

Contact Person

Name: Randi L Van Rees

Phone: (515) 996-9400 Email Address: FATRANDIS@AOL.COM

Classification: Class C Liquor License (LC) (Commercial)

Term: 12 months

Effective Date: 01/20/2013

Expiration Date: 01/19/2014

Privileges:

Class C Liquor License (LC) (Commercial)

Outdoor Service

Status of Business

BusinessType: Privately Held Corporation

Corporate ID Number: 304856 Federal Employer ID #

Ownership

Randi L Van Rees

First Name: Randi L Last Name: Van Rees

City: Van Meter State: lowa Zip: 50261

Position President

% of Ownership 100.00 % U.S. Citizen

Insurance Company Information

Insurance Company: Founders Insurance Company

Policy Effective Date: Policy Expiration Date:

Bond Effective Continuously: Dram Cancel Date:

Outdoor Service Effective Date: Outdoor Service Expiration Date:

Temp Transfer Effective Date: Temp Transfer Expiration Date:



City of Van Meter Application For Employment

PLEASE PRINT OR TYPE

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the City of Van Meter.

| Position(s) ap | oplied for | Po | olice Of | ficer | Date of Ap | plication <u>07</u> / | <u>1,6</u> 2013 |
|---|---|--|------------|---|-----------------|-----------------------|-----------------------|
| Name | Boswell | | | Christopher | | | Don |
| Julya | Last | | First | | | | Middle |
| Address | 2534 140th st | | Ì | Van Meter | | Iowa | 50261 |
| | Street | | | City | | State | Zip Code |
| Telephone (_ | 51)59962175 c | other Phone 5 | 15) 97 | 79-2738 | Social Security | y <u>481-06-076</u> | 88 |
| Have you eve | er been employed by t | the City of Van | Meter b | efore? | □ Yes | x No | |
| Are you legall | y eligible for employn | nent in this cou | ntry? | _kYes ☐ No | | | |
| Date available | e to begin work <u>07</u> | <u>/ 23/ 20</u> | 013 | | | | |
| Type of emplo | oyment desired | Full-Time | ☐Part- | Time [| Temporary | | |
| Ulawa wayi baa | un nanvioted of a crim | o in the last se | von (7) w | ooro2 🗆 Vo | n V No | | |
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| COLLEGE Northwe | est Missouri State University | 2 | MAJOR | DEGREE | AgriScience | | |
| OTHER lowa Law | Enforcement Academy | 12 weeks | 1 | 992 | Police Officer | | |
| | 100 1 | | | | | | |
| Employme | | for your post fo | our (4) a | amalayara aa | aianmanta av | valuataas aativit | ion starting with th |
| most recent. | ollowing information f | or your past it | our (4) 6 | employers, as | signifients of | volunteer activit | ies, starting with tr |
| FROM | 1992 TO Presen | t | 7 | EMPLOYER lowa DOT Enf | TELEPHONE | 515-996-2284 | |
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| | | | | Police officer for the State of Iowa | | | |
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| functions: | | s, and/or certificates that ma | y qualify you as being able to perform job-related | | | |
| References | | | | | | |
| Capt. Rober | NAME t Johnson | TELEPHONE (5)5-250-5973 | YEARS KNOWN | | | |
| Sgt. Joe Fa | | (515) 689-8060 | 12+ | | | |
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| ****** | ******* | ******* | ******************** | | | |
| Signature of Dire | ctor | OFFICE USE C | Position Appointe | | | |
| Hire Date | | | Starting Wage | | | |

To whom it may concern:

I am applying for the position of Reserve Police Officer. With my vast experience in management and dealing with people in my career as a Program Director at Vatterott College and my dedication that I have had for the past 7 years for the city as a Firefighter I would make a great asset to the Van Meter Police Department. I have a great working knowledge of the laws as well as city ordinances and have worked hand and hand with the local and surrounding Law Enforcement agencies. I have built a great relationship with them not only on a professional basis but on a personal level. I work hard and am continuously training and teaching as a Fire Instructor for both the State of Iowa and PRI and would show the same dedication to the Police Department. I have lived in the City since 2000 and have 5 children in the school system, I am involved in the community as a Webelo Leader and Trainer for the local Cub Scout Pack, help coach Baseball and do the yearly fire safety programs for the preschool, k-2nd grades and daycares in the community.

I am confident that with the direction of Chief Daggett I will be as dedicated to this as I am with everything else I do in and out of the community and would make a great law enforcement officer for our community.

Thank you for your time and consideration.

Sincerely,

Christopher D Reha



City of Van Meter Application For Employment

PLEASE PRINT OR TYPE

REASON FOR LEAVING Presently Complayed

| Position(s) a | applied for Research | Police E | CC:c. | 25 | Date of Application _ | 3 11 113 |
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| Name | Roba | | | Christop | oher | Devinis |
| v 15 | Last | | | First | | Middle |
| Address | 206 Meyer (| Ct | V | an Meter | IA State | 50261 |
| | Street | | (| City | State | Zip Code |
| Telephone (| 5151210-7721 0 | ther Phone (5 | 15) 30 | 9-9000 S | ocial Security 478 | -84-2903 |
| | | | | | | , |
| Have you ev | er been employed by t | he City of Van | Meter b | efore? | Yes 🗌 No | |
| | | | | | | |
| Are you lega | ally eligible for employm | ent in this cour | ntry? | Yes No | | |
| Date availab | le to begin work <u>3</u> | 115 113 | | | | |
| | | | F96 | | | |
| Type of emp | loyment desired F | ull-1 ime | ₹Part- | Time L | Temporary | |
| | en convicted of a crime | e in the last sev | en (7) y | ears? Yes | s 🖾 No | |
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| References | | |
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505 Grant Street P.O. Box 160 Van Meter, Iowa 50261 City Hall: 515-996-2644 Fax: 515-996-2207 Dispatch: 515-993-4567

Cellular: 515-202-4154

Email:

POLICE DEPARTMENT

William J. Daggett, Chief

APPLICATION FOR RESERVE POLICE OFFICER WITH THE CITY OF VAN METER, IOWA

| Reha | Christopher | 1) |
|--|---|--|
| Last Name | First Name | Middle Initial |
| 206 Meyer C+ | Van Meter IA City/State | 50261 |
| Address | City/State | Zip Code |
| 515-996-931 | 9 51 | 5-216-7721 |
| Home Phone Number | | hone Number |
| Valleratt Col Employer | lege 7000- | Fleur Dr Des Moines 1A 50321 |
| | | oyer's Address |
| 478-84-296 | 13 | |
| Social Security Number | | Hart and the rest of |
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505 Grant Street P.O. Box 160 Van Meter, Iowa 50261 City Hall: 515-996-2644 Fax: 515-996-2207

Dispatch: 515-993-4567 Cellular: 515-202-4154

Email:

7/1/12

APPLICANT PERSONAL HISTORY STATEMENT

| Application for position of: ☑ Police Office | cer 🗆 Civilian Staff (Check only one box) Date: |
|---|---|
| so state with N/A. If space avail referenced block. DO NOT MI verification to determine your qu | Hand-write or handprint an answer to every question. If question does not apply to you lable is insufficient, use a separate sheet and precede each answer with the number of that SSTATE OR OMIT material fact since the statements made herein are subject to califications for employment. First Name Wristopler Middle Name: Devocis |
| | (attach a copy of your birth certificate) |
| | |
| Sex: Date of Birth: 07/28/ | M Place of Birth: Atlantic Ioub |
| | |
| Home Phone: 515-996-9319 Cell | Phone: 515-210-7721 Work Phone: 515-309-9000 |
| | |
| al CO | + Van Meter 1A 5026 (U.S. Citizen? XYes 11 No |
| E-Mail Address: Carumta (as h | notmail.com |
| MARRIAGE STATUS | |
| Are You? Married Sir | ngle □ Separated □ Divorced □ Widowed □ |
| Spouse's Full (Maiden) Name: Wikke | Jo Weir Reha Date of Birth: 1/18/1975 |
| Spouse's Address if Different From Yours | s: |
| Spouse's Cell Phone Number: 5/5- | 210-7725 E-Mail Address: nikki: reha Qgmail, com |
| Spouse's Employer: Dallas Cent | ter Grimes Schools. Phone Number: 515-992-3838 |
| Date of Marriage: 08/04/01 | Location: 5+ Anthony's Cathelic Church Des Marine |
| | te of birth, marriage dates, current address and phone numbers: |
| | |
| | |
| | |

| Authorization and Release: | |
|--|---|
| I, Christopha Danis Leke or data pertaining to me which an individual, compan | authorize the complete release of these records |
| or data pertaining to me which an individual, compan | y, firm, corporation, institution, school or university |
| law enforcement or public agency may have. I author | rize the full release of the information described |
| above, without any reservation, throughout any durati | ion of my employment at the City. I certify that all |
| information provided below is true and accurate to the | |
| consent shall be valid in original, facsimile ("fax"), or | 그런 그렇게 하게 있는 것으로 가득하다면 있는데 이번 모든데 모든데 그런데 하셨습니다. 그렇게 하게 있는데 뭐 되었다면 그렇게 |
| Meter's privacy practices are dictated by the Code of | the State of Iowa and can be found at |

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me above are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

I further agree and consent in advance to being summarily discharged without cause or hearing if any of the above information contains any misrepresentation or falsification or if any material information has been omitted.

Signature of Applicant

http://www.iowa.gov.

Date /

After your application is submitted it will be reviewed and a background investigation will be initiated. Qualified candidates will be scheduled for an interview. Further testing may be necessary to determine fitness and mental aptitude. If you should have any question regarding the Van Meter Police Department's Reserve Officer Program feel free to contact Chief William Daggett at wdaggett@vanmeteria.gov or at 515-202-4154.

Thank you for applying as a Reserve Officer with the Van Meter Police Department. Our organization is comprised of men and women from the community dedicated to serving the community. I look forward to meeting you as you are considered as a member of our team.

William J. Daggett Chief of Police

PERMISSON TO CONDUCT BACKGROUND AND ACKNOWLEDGEMENT PAGE

I understand that by Van Meter City definition a full-time employee is one who works thirty two hours or more per work week on a regularly scheduled basis. A part-time employee is one who works a minimum of twenty hours per week on a regularly scheduled basis but not more than thirty one. A Reserve Police Officer is one who is scheduled to work no less than sixteen hours per month and may work more than that, however, they are never considered to be scheduled on a regular basis regardless of monthly scheduling practices and they do not qualify as a part-time or full-time employee. Compensation for hours worked if approved is at the sole discretion of the City of Van Meter and does not constitute an employment contract nor a designation of employee status.

Signature of Applicant

Date

Background Screening Disclosure:

The City of Van Meter (the "City") may request a comprehensive review of your background information from a consumer reporting agency in connection with your employment application and for employment purposes, including promotion, reassignment, or retention as an employee. Your background information may be obtained in the form of consumer reports and/or investigative consumer reports. These reports may be obtained at any time after receipt of your authorization and, if you are hired by the Company, throughout your employment. City of Van Meter 505 Grant Street Van Meter, Iowa 50261, 1-515-996-2644, and its designated agents and representatives or another consumer reporting agency will prepare or assemble the reports. The scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: consumer credit, names and dates of previous/current employment, worker's compensation claims, criminal history records (from local, state, federal, international and other law enforcement agencies' records), sexual offender's lists, wants and warrants records, motor vehicle records, military records, educational verification, license verification, civil cases, OIG/GSA, OFAC/patriot act, any sanction lists, finger printing and drug testing. These reports may include information as to your general reputation, character, personal characteristics, mode of living, work habits, job performance and experience along with reasons for termination of past employment from previous employers. You may request more information about the nature and scope of any investigative consumer reports by contacting the Company. A summary of your rights under the Fair Credit Reporting Act is also being provided to you.